

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		48	12/6/80
<b>FORMALITY REVIEW</b>	BD	67368	12/1/81
<b>RESPONSE FORMALITY REVIEW</b>	M.H	625	02-17-81

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

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